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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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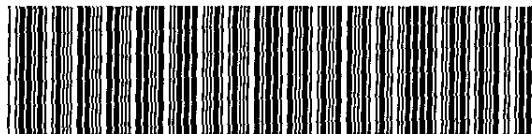
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE  
10/29/03

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Clear Skies Aviation, L.L.C.

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffrey A Smith

(Name of Person)

Clear Skies Aviation, L.L.C.

(Firm/Company)

603 Southwest 77th Way

(Address)

Pembroke Pines, FL 33023

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeffrey A Smith

(Name of Person)

at ( 954 ) 275-1360

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Clear Skies Aviation, L.L.C.

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

603 Southwest 77th Way  
Pembroke Pines, FL 33023

#### Mailing Address:

603 Southwest 77th Way  
Pembroke Pines, FL 33023

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Jeffrey A Smith

Name

3861 West State Road 84, Unit 101

Florida street address (P.O. Box **NOT** acceptable)

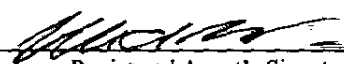
Davie, FL 33312

FL

City, State, and Zip

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*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

  
Registered Agent's Signature

(CONTINUED)

EFFECTIVE DATE  
10/20/03

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Jeffrey A Smith

3861 West State Road 84, Unit 101

Davie, FL 33312

MGRM

William R Vrastil

1875 Northwest 141st Avenue

Pembroke Pines, FL 33028

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jeffrey A Smith

Typed or printed name of signee

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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**Article V: Effective Date of Limited Liability Company**

The effective date of Clear Skies Aviation, L.L.C. is October 20, 2003

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